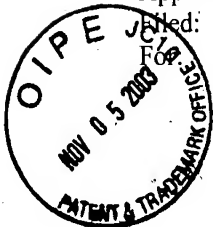


Practitioner's Docket No. 701039-051580

PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of: Tjorvi Ellert Perry et al.
Application No.: 10/056,991 Group No.: 1651
Filed: 01/25/2002 Examiner: Leon B. Lankford Jr.
APPARATUS AND METHOD FOR EVALUATING TISSUE ENGINEERED
BIOLOGICAL MATERIAL



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3. Statement of Limited Recognition Under 37 CFR Sec. 10.9(b) - - Leena Karttunen (1 pg.);
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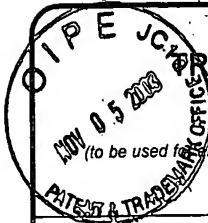
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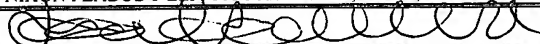
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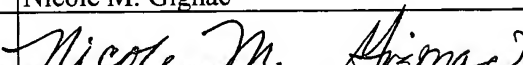
	TRANSMITTAL FORM	
	Application Number	10/056,991
	Filing Date	01/25/2002
	First Named Inventor	Tjorvi Ellert Perry
	Art Unit	1651
Examiner Name		Leon B. Lankford Jr.
Attorney Docket Number		701039-051580
Total Number of Pages in This Submission		

ENCLOSURES (Check all that apply)		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please Identify below): Statement Under Limited Recognition - 37 CFR Sec. 10.9(b) - L. Karttunen; Certificate of Mailing; Return Receipt Postcard.
Remarks The Commissioner is authorized to charge the NIXON PEABODY LLP Deposit Account No. 50-0850 for deficiencies associated with this submission.		
SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT		
Firm or Individual name	David S. Resnick (Reg. No. 34,235) Leena Karttunen (37 CFR Sec. 10.9(b)) NIXON PEABODY LLP, 101 Federal Street, Boston, MA 02110	
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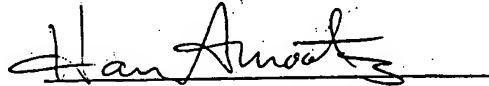
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